



MIAMI-DADE COUNTY
GENERAL SERVICES ADMINISTRATION, FACILITIES and UTILITIES
MANAGEMENT, OFFICE of ELEVATOR SAFETY
 111 NW 1st Street, Suite 2410
 MIAMI, FLORIDA 33128-1979
 305.349.6033

www.miamidade.gov/gsa/elevatormain.asp

SECTION 1 – ELEVATOR SERIAL NUMBER					
Serial Number		Note: The serial number must be present or the application will be returned.			
SECTION 2 – ELEVATOR PERMIT TRANSACTION TYPE					
Please check the appropriate box. <input type="checkbox"/> Alteration <input type="checkbox"/> Repair Description of work:					
<input type="checkbox"/> Planned <input type="checkbox"/> Emergency					
SECTION 3 – ELEVATOR COMPANY INFORMATION					
Organization Name				Estimated Completion Date	
Address					
City		County		State	Zip Code
CONTACT INFORMATION					
Contact Name			Primary Business Phone Number		
Primary E-Mail Address			Alternate Phone Number or Fax Number		
SECTION 4 – ELEVATOR INFORMATION					
Elevator Class: Please check the appropriate box.					
<input type="checkbox"/> 01-Traction Passenger	<input type="checkbox"/> 07-Moving Walk	<input type="checkbox"/> 14-Sidewalk Elevator			
<input type="checkbox"/> 02-Hydraulic Passenger	<input type="checkbox"/> 08-Inclined Lift	<input type="checkbox"/> 15-Material Lift/Dumbwaiter with Automatic Transfer Device			
<input type="checkbox"/> 03-Traction Freight	<input type="checkbox"/> 09-LU/LA (Limited Use / Limited Application)	<input type="checkbox"/> 16-Special Purpose Personnel Elevator			
<input type="checkbox"/> 04-Hydraulic Freight	<input type="checkbox"/> 10-Dumbwaiter	<input type="checkbox"/> 17-Inclined Stairway Chairlift			
<input type="checkbox"/> 05-Hand Power Passenger	<input type="checkbox"/> 12-Escalator	<input type="checkbox"/> 18-Inclined & Vertical Wheelchair Lift			
<input type="checkbox"/> 06-Hand Power Freight					
Manufacturer's Serial Number					
Elevator Number	Capacity	Landings	Travel in Feet	Speed Up	Speed Down
Building Type: Please check one of the following.					
<input type="checkbox"/> C-Commercial (ex. airports, banks, department stores, office buildings)		<input type="checkbox"/> HP-Hospitals (medical centers, nursing homes, adult congregate living facilities, etc)			
<input type="checkbox"/> CC-Community College		<input type="checkbox"/> I-Industrial (paper mills, power plants, manufacturing)			
<input type="checkbox"/> CD-Condominiums		<input type="checkbox"/> R-Food service			
<input type="checkbox"/> CH-Churches		<input type="checkbox"/> S-Schools (except grades K-12)			
<input type="checkbox"/> CI-City Buildings		<input type="checkbox"/> SE-Schools grades K-12			
<input type="checkbox"/> CO-County Buildings		<input type="checkbox"/> ST-State agencies			
<input type="checkbox"/> H-Public lodging (hotel, motel)		<input type="checkbox"/> U-Universities			

SECTION 5 – BUILDING INFORMATION

Primary Name (enter name of the building owner)

D/B/A Name (enter Business Name or Doing Business As Name of the building)

Main Address (enter building address)

City, Village, Township

County

State

Zip Code

Folio No.

Master Permit No.

SECTION 6 – VARIANCE INFORMATIONDoes the elevator being installed meet the minimum standards
of Chapter 30 of the Florida Building Code? ☐ Yes ☐ NoIf no, you are required to contact Miami-Dade County Office of Elevator Safety to have the variance granted. The
variance must be approved prior to approval of the install permit.**SECTION 7 – APPLICANT SIGNATURE****All Permits are valid for one year from date of issuance (Chapter 61C-5, FAC)**

Authorized Signature of Applicant

Date Signed

Social Security Number*

Date Submitted

* Under the Federal Privacy Act, disclosure of Social Security Numbers is voluntary unless specifically required by Federal statute. In this instance, disclosure of social security numbers is mandatory pursuant to Title 42 United States Code, Sections 653 and 654; and sections 409.2577, 409.2598, and 559.79, Florida Statutes. Social Security numbers are used to allow efficient screening of applicants and licensees by a Title IV-D child support agency to assure compliance with child support obligations.

SECTION 8 – OFFICE USE ONLY

Maintenance Status

Maintenance Contract

Maintenance Company

Age Installed (note: this
is the date the permit to
install is approved)

For Validation Use Only

Approved By

Approval Date

Inspector's Name